



BUILDING CODE COMPLIANCE OFFICE
CODE COMPLIANCE DIVISION
MIAMI-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1603
MIAMI, FLORIDA 33130-1563
(305) 375-2901
FAX (305) 375-2558

MIAMI-DADE COUNTY CONTRACTOR COMPLAINT FORM

Date: _____

Dear Citizen:

The Contractor Licensing and Code Compliance Division of the Miami-Dade County Building Code Compliance Office investigates complaints involving Miami-Dade County contractors. In addition, the Office investigates complaints concerning the work of unlicensed contractors.

In order to register your complaint, please complete the enclosed form and return it to the Code Compliance Division located at 140 West Flagler Street, Suite 1603, Miami, Florida 33130. If insufficient space is provided on the complaint form for any answer, please use a separate sheet. **Do not write on the reverse side of this form.**

All complainants must submit front and back copies of their contract and front and back copies of all canceled checks or receipts evidencing payment to the contractor at the time you file your complaint. In addition, please submit copies of any business cards or any advertisements used by the contractor or his employees that you have in your possession. Do not send original documents under any circumstances.

Upon receipt of the completed complaint form and accompanying documents, a Code Compliance Investigator will open a case file and a copy of your complaint will be sent to the contractor for response. Since the Code Compliance Investigator may have to contact you for additional information, please provide a telephone number where the Code Compliance Investigator can contact you during the day. When the investigation is complete and the Code Compliance Investigator has confirmed a violation of the contractor licensing laws, the Code Compliance Investigator will either issue tickets or notices of violation to the violator, initiate a case in criminal court through the State Attorney's Office or present the case before a committee of the Construction Trades Qualifying Board known as the Probable Cause Panel in order to initiate a formal disciplinary hearing. If the Probable Cause Panel orders a formal hearing, a hearing before the Construction Trades Qualifying Board will be scheduled. Upon a finding of guilty, the Board may impose one or more of the following penalties: reprimand, suspension or revocation of the contractor's license, restitution or imposition of fines of up to \$5,000.00 per count.

Since investigations and cases vary in complexity duration and priority, a definite time frame cannot be given as to when the complaint process will be completed for any individual case. Further, because the Statute of Limitations establishes time limits within which you must assert a cause of action in court, please do not delay in consulting with an attorney or initiating any action to preserve your civil remedies in this matter. Finally, you may have certain rights under Florida law if you have suffered damages caused by a state registered contractor or a construction company with whom you have a signed contract.

Thank you for your cooperation.

Contractor Licensing and Code Compliance Division
(305) 375-2901

(Please Type or Print)

This complaint becomes a matter of public record at the time it is filed and is available for review and copying by the subject of the complaint and the general public.

Your Name: _____

Address: _____

Telephone: () _____

Business

Beeper: () _____

() _____

Residence

SUBJECT OF COMPLAINT

Name: _____

Person and/or Company

Address: _____

Telephone: () _____

Beeper: () _____

License No.: _____

[If Known]

If the contractor involved is state licensed, you need to also file a complaint with the State of Florida Department of Business and Professional Regulation (DBPR). For information on the filing of complaints with DBPR, please call 305-470-5617.

I am complaining in my capacity as:

☐ Homeowner ☐ Contractor ☐ Subcontractor ☐ Supplier ☐ Building Official

☐ Owner of Commercial Structure ☐ Other _____

BACKGROUND DATA

1. Was contract in writing? ☐ Yes ☐ No If yes, enclose copy
2. Contract Price: \$_____ Date on contract_____
3. Job address:_____
4. Contractor employees you had contact with. Name: _____
Name: _____ Name: _____

CONTRACT INFORMATION

5. Was the contract signed in your presence? ☐ Yes ☐ No By whom:_____
6. At the time you entered into the contract, did you believe the person/company was a contractor licensed or certified by the State of Florida and/or Miami-Dade County? ☐ Yes ☐ No
- 6a. If yes, why? _____

7. Was there any discussion as to whether the person/company was affiliated with another person/ company that was licensed or certified? ☐ Yes ☐ No If so, what was said, when and by whom?

8. What work was supposed to be done under the terms of the contract? _____

9. Why are you dissatisfied? _____

10. If additional contracts/agreements were signed with the same or related contractors, please explain the circumstances?

11. Was there any discussion as to whether building permits would be obtained? ☐ Yes ☐ No If so, please relate what if anything was said, by whom and when the statement was made. _____

12. Was work begun by your contractor? ☐ Yes ☐ No If so, what date? _____
Describe the extent of work actually done by the contractor and the value of work done, if you know?

13. When was the last time the contractor performed work on the job? _____

14. Have you had discussion with him or his representative since then? ☐ Yes ☐ No If so, what was said?

15. Did he work steadily from the date he started work until the last day he worked? ☐ Yes ☐ No If so, please relate what happened between these dates. _____

16. Has an architect or engineer employed by you or the contractor inspected the work? ☐ Yes ☐ No If so, please provide name, address and telephone number and a copy of the report: _____

17. Has the contractor offered or made attempts to make repairs? ☐ Yes ☐ No _____

18. Have you fired the contractor? ☐ Yes ☐ No How was the contractor terminated? _____

19. Would the contractor be allowed to return to finish work or do repairs? ☐ Yes ☐ No If so, what type of work remains to be done? _____

20. Has the job now been completed by you or another contractor? ☐ Yes ☐ No

<i>FINANCIAL INFORMATION</i>

21. Total paid to contractor: \$_____ If you made payments, please list the dates and payments that were made, the amount paid and the form of the payments (check or cash). If checks were given, who were they made payable to? (Please provide copies front and back of all checks.) If cash was given, provide **copies** of all receipts. _____

22. What is the actual or estimated cost to finish the job if you hire another contractor? \$_____ Attach **copies** of estimate(s) from licensed contractor(s).
23. Have you had to pay subcontractors or suppliers directly? ☐ Yes ☐ No If yes, how much and why? _____

24. Are there now unpaid bills owed to subcontractors or suppliers whom the contractor should have paid? ☐ Yes ☐ No If so, how much is owed? _____
25. Did contractor sign any statements to the effect that all bills have been paid? ☐ Yes ☐ No If so, please provide a copy. _____

26. Did you obtain a partial or full release of lien from your contractor? _____ (If you have said documents, please attach a copy.) Who provided you with this release? _____
When? _____ Were any payments made based upon your reliance on said release?

27. Have any suppliers, material person, subcontractors or anyone else advised you or actually placed liens on your property? _____ If so, please list the name, address and telephone number of the person/entity, the amount of the lien, and an explanation of what work/services/materials were supplied that gave rise to the claim or lien. (Please attach copies of all notices/claims of lien filed on your property.)

Florida Statutes 837.06, False Official Statements: Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of this official duty shall be guilty of a misdemeanor of the second degree.

Signature

Date

Print Name

STATE OF FLORIDA, COUNTY OF MIAMI-DADE:

Sworn to and subscribed before me this _____ day of _____, 20_____,
by _____.

Personally known _____

Produced Identification _____

Type: _____

Notary Public, State of Florida

(SEAL)